P09000101255

(Re	equestor's Name)	
(Ac	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only

7

AMEND

04-18-13



300246441523

04/10/13--01012--014 **\$2.50



COVER LETTER

TO: Amendment Section Division of Corporations Powers Lewis Inc DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Powers ! DRive For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee **□**\$43.75 Filing Fee & □\$43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy

enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation

of

Aranna fowers Lewis Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P&961489

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

LEWIS Medical Tr	caining Inc The new
name must be alstinguisnable and contain the word -corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	3418 South Date Mabry Hwu TAMpa FL
	33629
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1868 Shore Drive South #503
	South Pasagone FL 33707
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
· · · · · · · · · · · · · · · · · · ·	Powers Lewis
1868 Shore (Florida stree	Drive South #503 et address)
New Registered Office Address: South Pasa orna (City)	, Florida 33707 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) X Change	P DAVID E Lewis	1868 Short DR SO
Add		#503
Remove		South PasaDena, Fl 3370
2) X Change	V Arianna Lewis	1868 Shore Drive South
Add		#503
Remove		South Pasading, FC 33707
3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change	·	
Add		· ·
Domesto		

The date of each amendment(s) adoption:	April 8,2013
Effective date if applicable:	April 8, 2013
	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient for	the shareholders. The number of votes cast for the amendment(s) for approval.
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes cast for the a	mendment(s) was/were sufficient for approval
by	(voting group)
	(voing group)
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
Dated 4-6-1	3
Signature AR	iama Powers duvis.
selected, by an	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court
appointed fiduc	ciary by that fiduciary)
	ARianna Powers Lewis (Typed or printed name of person signing)
	President CEO
	(Title of person signing)